

**DEFENDANT'S AFFIDAVIT AND
OBJECTION TO EXECUTION**

JD-HM-26 Rev. 2-04 P.B. § 17-53

**STATE OF CONNECTICUT
SUPERIOR COURT**
www.jud.state.ct.us

Judicial <input type="checkbox"/> District of: _____	Housing <input type="checkbox"/> Session at: _____	<input type="checkbox"/> G.A. No. _____	DOCKET NO. _____
ADDRESS OF COURT			

NAME(S) OF PLAINTIFF(S) [LANDLORD(S)]

NAME(S) OF DEFENDANT(S) [TENANT(S)]

The undersigned duly deposes and says that I am the defendant/defendant's attorney in the above-entitled matter and state as follows:

1. I am over the age of eighteen years and I believe in the obligation of an oath.
2. I object to the issuance of an execution in this case for the following reason(s): (*X all that apply*)

- A. The Use and Occupancy Arrearage payment of \$ _____ was made on or before _____.
 B. The Use and Occupancy Arrearage payment of \$ _____ was offered on _____ and was refused.
 C. The Landlord has not fulfilled his/her obligations agreed to in the stipulation (*Please explain*):

 D. I was prevented from fulfilling my obligations under the stipulation:

 E. Other (*Please explain*):

3. I am, therefore requesting that a court hearing be scheduled in this matter.

SIGNED (Defendant/Defendant's Attorney)	SUBSCRIBED AND SWORN TO BEFORE ME ON (Date)	SIGNED (Clerk/Assistant Clerk)
---	---	--------------------------------

CERTIFICATION

I hereby certify that a copy of this affidavit was mailed/
delivered to all counsel and pro se parties of record on: _____ DATE COPY(IES) MAILED OR DELIVERED

SIGNED (Attorney or pro se party)	ADDRESS (No., street, town, and zip code)
-----------------------------------	---

NAME OF EACH PARTY SERVED AND ADDRESS AT WHICH SERVICE WAS MADE (*Attach additional sheet if necessary*)

ORDER (<i>to be completed by Clerk's Office</i>)		FOR COURT USE ONLY
OBJECTION <input type="checkbox"/> Sustained <input type="checkbox"/> Overruled		DATE
BY ORDER OF THE COURT		DATE